



**NEW HAMPSHIRE ELECTRIC COOPERATIVE'S (NHEC) 2010
FOSSIL FUEL REBATE PROGRAM COMPLETION FORM**

Member Name:
Member Account Number:
Project Address include city, state, zip:
Daytime phone number:
Email address (if you would like to be contacted via email):
Installer must fill out the information in this block (please initial) Brief description of system _____ The system has been installed in compliance with the applicable requirements of the local codes authority, State of NH codes, and National Codes. _____ Installation of the system is complete and the system is operating as designed. Comments:
Signature of Installer: Date:
Member Signature: Date: